

# ERECTIONS, LIBIDO & TESTOSTERONE

What the evidence says about Pycnogenol, arginine, citrulline, and the herbs sold for male sexual health, and the things that work better than any of them.

~90%

of men with mild ED reported normal erections after 3 months of Pycnogenol + L-arginine in the first trial. That trial had no placebo group.

+10 pts

IIEF erectile score over 3 months with Pycnogenol + arginine aspartate, vs +4 on placebo, in a 124-man randomized trial.

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herbs that match a prescription ED drug. The best ones have modest effects in small studies.

## THE SHORT ANSWER

**Pycnogenol probably helps erections when the problem is mild and vascular.** It is a French maritime pine bark extract that boosts nitric oxide, the same pathway ED drugs act on, only much more gently. Nearly all of the evidence pairs it with L-arginine, the raw material the body uses to make nitric oxide.

It does little for libido directly. The small rise in desire seen in trials most likely follows from better erections. It takes 1 to 3 months to build up and does not work on the day you take it.

## WHY ARGININE ASPARTATE?

Convenience, not science. The first trial used Sargenor, a drinkable arginine aspartate already sold in Europe. Later trials tested Prelox, a commercial product built on the same pairing. None of the published trials compared it against plain arginine or citrulline.

## ARGININE OR CITRULLINE?

### L-arginine

This is what the trials used. Much of the arginine you swallow is broken down in the gut and liver before it reaches the bloodstream. High doses often upset the stomach.

### L-citrulline

The kidneys convert it into arginine. It raises blood arginine more than the same dose of arginine and is easier on the stomach. On its own, 1.5 g/day improved erection hardness in a small trial. It has not been tested with Pycnogenol.

Taking both together is reasonable. In one study, the pair raised blood arginine more than either one alone at the same total dose.

### THE VITAEGIS STACK

## DAILY REGIMEN

| ITEM               | DOSE                          | WHEN                                      | GOAL                        |
|--------------------|-------------------------------|-------------------------------------------|-----------------------------|
| Pycnogenol         | 50 mg twice daily             | Breakfast and dinner                      | Blood flow                  |
| L-citrulline       | 3 g                           | Morning, or 60 min before sex or training | Blood flow                  |
| L-arginine         | 1.5 g                         | With the citrulline                       | Blood flow                  |
| Wisconsin ginseng  | Per label                     | Morning; it can disturb sleep             | Energy, blood flow          |
| Beets              | 1 cup juice or 2 medium beets | Daily, as food                            | Nitrate for nitric oxide    |
| Watermelon         | About 2 cups                  | Daily, as food                            | A little natural citrulline |
| Maca root          | 1.5–3 g                       | Morning                                   | Libido                      |
| Tongkat ali        | 200–400 mg extract            | Morning, 5 days on, 2 off                 | Testosterone                |
| Ashwagandha KSM-66 | 600 mg (or 300 mg twice)      | Evening                                   | Testosterone, stress, sleep |

## HOW TO TAKE IT

### DAILY SCHEDULE

#### MORNING

Pycnogenol 50 mg, Wisconsin ginseng, maca, tongkat ali. Take with breakfast.

#### BEFORE ACTIVITY

L-citrulline 3 g and L-arginine 1.5 g, about 60 minutes before sex or training. On other days, take them in the morning.

#### EVENING

Pycnogenol 50 mg with dinner. Ashwagandha KSM-66 600 mg, which can help sleep.

**CAUTION** Pycnogenol, citrulline, arginine, beets, and ginseng all lower blood pressure, and the effects add up. Never combine this stack with nitrates such as nitroglycerin. Talk to a doctor first if you take blood pressure medication, ED drugs, blood thinners, diabetes medication, thyroid medication, or immunosuppressants.

### NOTES ON THE PICKS

#### Wisconsin ginseng

This is American ginseng (*Panax quinquefolius*). The ED trials used Korean red ginseng (*Panax ginseng*), so the evidence does not transfer directly. American ginseng is calmer and less stimulating. Swap in Korean red ginseng if erections are the main goal.

#### Beets and watermelon

Food support, not replacements. Beets supply the nitrate the body turns into nitric oxide. Two cups of watermelon hold well under 1 g of citrulline, far less than the 3 g supplement. Red urine after beets is harmless.

#### Pycnogenol 50 mg x2

100 mg a day sits inside the 80–120 mg range used in the trials. Splitting the dose keeps levels steadier.

#### Tongkat + ashwagandha

A common pairing. Many people take ashwagandha for 8–12 weeks, then a break. Check testosterone before and after 3 months to see if it is working.

### A SENSIBLE ORDER

#### WEEKS 0–4

Bloodwork, Kegels, cardio, fixing your sleep. Start Pycnogenol, citrulline, and arginine, plus daily beets and watermelon.

#### WEEKS 4–12

Add ginseng, then maca, then tongkat ali and ashwagandha, one every 2 to 4 weeks, so you know what is working and what causes side effects.

# HERBS BY GOAL

## ERECTION STRENGTH

| HERB                         | EVIDENCE        | TYPICAL DOSE       | NOTES                                                                                                                               |
|------------------------------|-----------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Korean red ginseng           | <b>MODERATE</b> | 900 mg 2–3×/day    | The best herbal evidence for ED, though the effects are small. Can cause insomnia. Interacts with warfarin and diabetes medication. |
| American (Wisconsin) ginseng | <b>WEAK</b>     | Per label          | A different species from Korean red ginseng, with little ED-specific research. Lowers blood sugar.                                  |
| Beetroot / dietary nitrate   | <b>WEAK</b>     | 300–500 mg nitrate | Raises nitric oxide, but there is little direct ED data. Antibacterial mouthwash blocks the effect.                                 |
| Horny goat weed (icariin)    | <b>WEAK</b>     | Not established    | Evidence comes mostly from lab and animal studies.                                                                                  |
| Ginkgo                       | <b>WEAK</b>     | 120–240 mg         | Mixed results, apart from some evidence for ED caused by antidepressants. Increases bleeding risk.                                  |
| Yohimbe                      | <b>AVOID</b>    | —                  | Causes anxiety, a racing heart, and blood pressure spikes. Doses in products are unreliable.                                        |

## LIBIDO

| HERB            | EVIDENCE        | TYPICAL DOSE       | NOTES                                                                                       |
|-----------------|-----------------|--------------------|---------------------------------------------------------------------------------------------|
| Maca            | <b>MODERATE</b> | 1.5–3 g            | Small trials show more desire with no change in testosterone. Works over 6–12 weeks.        |
| Fenugreek       | <b>MODERATE</b> | 500–600 mg extract | Helps libido; effects on testosterone are mixed. Studies are mostly industry-funded.        |
| Saffron         | <b>MODERATE</b> | 30 mg              | Studied mainly for sexual side effects of antidepressants.                                  |
| Mucuna pruriens | <b>WEAK</b>     | 5 g powder         | Contains L-dopa, a dopamine precursor. Do not combine with MAOIs or Parkinson's medication. |
| Tribulus        | <b>WEAK</b>     | 750–1500 mg        | Slight effect on libido. It does not raise testosterone in men.                             |

## TESTOSTERONE

| HERB                       | EVIDENCE            | TYPICAL DOSE                    | NOTES                                                                                                            |
|----------------------------|---------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------|
| Ashwagandha                | <b>MODERATE</b>     | 300–600 mg (KSM-66 or Sensoril) | About a 10–20% rise, likely by lowering stress. Rare liver injury has been reported. Avoid with hyperthyroidism. |
| Tongkat ali                | <b>MODERATE</b>     | 200–400 mg standardized extract | Works best when testosterone starts low. Product quality varies a lot, so buy tested brands.                     |
| Vitamin D, zinc, magnesium | <b>IF DEFICIENT</b> | Based on lab results            | Only helps when you are low. Test before supplementing.                                                          |

## WHAT WORKS BETTER

### 01 Get checked first

Ask for morning total and free testosterone, SHBG, LH, prolactin, TSH, fasting glucose or A1c, lipids, and vitamin D. ED often appears 3 to 5 years before heart disease, so it is worth a cardiovascular check too.

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### 02 Review your medications

SSRIs, finasteride, beta-blockers, opioids, and some blood pressure drugs are common and often fixable causes.

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### 03 Ask a doctor about a PDE5 inhibitor

Low-dose daily tadalafil (generic Cialis) is far more effective than any supplement and is inexpensive as a generic. It requires a prescription and must never be combined with nitrates.

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### 04 Train your pelvic floor

Kegels: squeeze as if stopping your urine midstream, hold for 5–10 seconds, and do 3 sets a day. In one trial, about 40% of men with ED regained normal function. It is free and underrated.

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### 05 Cardio and lifting

About 40 minutes of moderate-to-vigorous cardio, 4 times a week, improves erectile scores. Heavy compound lifts 3 times a week support testosterone and insulin sensitivity.

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### 06 Lose waist fat

Fat tissue converts testosterone into estrogen. Losing it can raise testosterone noticeably.

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### 07 Sleep 7 to 9 hours

One week of 5-hour nights lowered testosterone by about 10–15% in young men. Loud snoring can mean sleep apnea, a common hidden cause.

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### 08 Cut alcohol, quit nicotine

Heavy drinking lowers both erections and testosterone. Nicotine damages blood vessels directly.

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### 09 Eat for blood flow

A Mediterranean-style diet, nitrate-rich greens (arugula, spinach, beets, celery), and flavanols from cocoa, berries, and green tea. Skip antibacterial mouthwash.

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### 10 Don't ignore the mind

Performance anxiety, stress, and depression drive much of ED in men under 45. Normal morning erections point to a psychological cause rather than a physical one. Sex therapy and CBT work well.

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## SOURCES

# THE PYCNOGENOL STUDIES

The key trials are small, and most involve researchers or funding tied to the maker of Pycnogenol. Treat the results as promising, not proven.

1. Stanislavov R, Nikolova V. Treatment of erectile dysfunction with Pycnogenol and L-arginine. *J Sex Marital Ther* 2003;29(3):207-13. 40 men, no placebo group. [doi.org/10.1080/00926230390155104](https://doi.org/10.1080/00926230390155104)
2. Stanislavov R, Nikolova V, Rohdewald P. Improvement of erectile function with Prelox: a randomized, double-blind, placebo-controlled, crossover trial. *Int J Impot Res* 2008;20(2):173-80. 50 men. [doi.org/10.1038/sj.ijir.3901597](https://doi.org/10.1038/sj.ijir.3901597)
3. Ledda A, Belcaro G, Cesarone MR, Dugall M, Schönla F. Investigation of a complex plant extract for mild to moderate erectile dysfunction in a randomized, double-blind, placebo-controlled, parallel-arm study. *BJU Int* 2010;106(7):1030-3. 124 men over 6 months. [doi.org/10.1111/j.1464-410X.2010.09213.x](https://doi.org/10.1111/j.1464-410X.2010.09213.x)
4. Yagi H, et al. Effects of a supplement combining Pycnogenol and L-arginine aspartate on lower urinary dysfunction compared with saw palmetto extract. *J Tradit Complement Med* 2016;7(1):117-120. [doi.org/10.1016/j.jtcme.2016.05.008](https://doi.org/10.1016/j.jtcme.2016.05.008)

Citations retrieved from PubMed. The evidence ratings for other herbs and lifestyle measures summarize the general research literature and are not a systematic review.

## NOT MEDICAL ADVICE

This guide is for education only. It does not diagnose, treat, or replace a doctor. These supplements have not been evaluated by the FDA to diagnose, treat, cure, or prevent any disease. ED can be an early sign of heart disease, diabetes, or hormone problems, so see a doctor before starting any supplement, especially if you take prescription medication or have a heart, kidney, liver, or blood pressure condition.

VITAEGIS VITALITY

# VITAEGIS

HEALTH · STEALTH · WEALTH